Dean’s Newsletter
July 26, 2004

Table of Contents
• The Clinician Educator Track: Opportunities for Career Development
• Charting a Future: Stanford University in the 21st Century
• Dr. Irv Weissman Testifies Before a Senate Committee on Stem Cell Research
• Opportunities for a Clinical Research Scholarly Concentration
• Dr. Ron Levy on Discovery Channel
• Stanford Medical Students Selected for HHMI Training Fellowships
• In Memoriam: Stephanie Anne Franchak
• Awards and Honors
• Appointments and Promotions

The Clinician Educator Track: Opportunities for Career Development

During the past two years we have made a number of changes in the professoriate in the School of Medicine. Our goal has been to better delineate the pathways for career development and more appropriately align them with the goals and expectations of faculty, departments, the School of Medicine and the University. To be successful, academic medical centers require a multiplicity of skills, knowledge and expertise and need to foster a community of individuals to carry them forth. A medical school faculty must support and advance its missions in education, research and patient-care. At Stanford we are committed to assuring excellence in each of these missions. We want also to foster collaboration, innovation and leadership in our faculty and students with an overarching goal of Translating Discoveries. (http://medstrategicplan.stanford.edu/)

It is important to recognize that to be successful as an outstanding investigator or clinician requires enormous time and focused commitment. While it was once believed that individual faculty should be outstanding in multiple areas (often referred to as the “triple threat” for those trained as MDs) in reality the time and skills required to be successful means that nearly all clinical faculty must choose whether to focus primarily on research or on patient care. Having outstanding full-time investigators and superb full time clinicians is important to the future of Stanford. That said, we also need to assure that we have a cadre of individuals who will serve at the interface as clinician-scholars/investigators in order to make sure that our efforts between “bench and bedside” are closely linked.

It is important that the professoriate be well defined to help assure the success of these goals and functions. Presently we have four faculty tracks in the School of Medicine: Investigator (or University Tenure Line), Non-tenure Line Research and Educator Track, Clinician-Scholar/Investigator (aka Medical Center Line) and the Clinician-Educator (which is centered within the School of Medicine). The guidelines for appointment and promotion in the first three of these lines are described in the Faculty Handbook or (http://med.stanford.edu/academicaffairs/handbook/TOC.html). During the past year we
have made additional progress in defining the Clinician-Educator track and I want to make sure you are aware of the information and opportunities now available for this important career pathway.

First, I want to thank Dr. Ken Cox, Senior Associate Dean for Pediatric and Obstetric Clinical Affairs who chaired a task force to better delineate the opportunities and benefits for Clinician-Educators in the School of Medicine. I also want to thank the individuals who worked with Dr. Cox since this was an effort that required participation of the School, Stanford Hospital & Clinics, and the Lucile Packard Children’s Hospital. The Committee included Drs. Norm Rizk, Gerry Shefrin, David Stevenson, and Ron Pearl, Mike Peterson, Keith Grundy, Dave O’Brien, Marcia Cohen, Cindy Johnson, Julia Tussing and Kathy Gillam.

Importantly, the Committee underscored the importance of the Clinician Educators to the ultimate success of our patient care mission – as well as the overall mission of the School and Medical Center. They also recognized that this is a category that will require evolution to optimize success. For example, most of the physicians categorized as clinician-educators have heretofore been junior and transient in their stage of career development. Indeed, of the 313 individuals appointed as clinician-educators (a number of whom are part-time) the vast majority have only recently completed training and very few have been in their position for more than five years. Our goal is to make this an attractive career path, one that offers opportunities for career advancement and provides compensation and benefits that are attractive and competitive.

To accomplish these goals we will be seeking Clinician-Educators who are committed to this important career path, which will enable them to provide patient care for approximately 90% of their time and devote the remainder to education of students, residents and fellows. We will also be seeking more senior physicians for these roles and will use national searches to identify the best candidates for these positions – which will require an approved business plan by the School and respective hospital before an appointment can be made. Appointments may be 3-5 years in length and are renewable based on performance. We further envision that in addition to providing patient care, a selected number of Clinician-Educators may serve as Medical or Program Directors. The criteria for promotion, which may be found in the School’s Faculty Handbook (http://www.med.stanford.edu/academicaffairs/) focus primarily on clinical excellence and teaching and do not require written scholarship (in contrast to the Clinician Scholar/Investigator track).

An important facet of the Cox Committee’s work was to develop guidelines for compensation and benefits. The goal has been to develop a competitive compensation schedule along with benefits that can include housing assistance and professional development time. The compensation guidelines are available at http://www.med.stanford.edu/academicaffairs/C~E_Benefits.html. Eligibility for a number of the benefits are based on clinician-educator faculty rank, the date of appointment (some being post July 1 2004), and length of service. For additional information about the Clinician/Educator Housing Assistance Program see
Our goal has been to develop a robust and attractive path that will permit us to recruit and develop outstanding Clinician-Educators. I am naturally cognizant that some in our community will continue to suggest that this is a tangential group but I want to underscore that I do not see it that way. In contrast, I see the importance of the Clinician-Educators to our future success in providing outstanding patient care and in further developing the clinical skills of our students and trainees. I see this track as one that can and should promote longitudinal career development and that will provide tangible value to both junior and more senior clinicians who excited about delivering outstanding patient care at Stanford and in being valued members of our community.

Charting a Future: Stanford University in the 21st Century

During the past year and especially over the summer, the Executive Cabinet (which is comprised of the President, Provost and Deans, including the directors of SLAC and the Hoover Institute) has been meeting regularly to craft the broad institutional initiatives that will shape the future of Stanford University during the 21st Century. What makes Stanford so exciting is the degree of interaction and cooperation that exists among the schools and how that is impacting the development of interdisciplinary research. Emerging from these discussions are 3 - 4 defining initiatives, two of which are already formed and two others that are being explored and developed.

The two initiatives that have been formed include BioX and the Institute for the Environment. Both are exciting in their own rights and both draw together faculty from virtually every School – and clearly from the School of Medicine. I have highlighted these in prior Newsletters.

The two additional initiatives that are evolving include the International Initiative, which is currently focusing on three overarching and interconnected sets of problems that will include:

- **Pursuing Security in an Insecure World** (including such issues as catastrophic terrorism, proliferation of weapons of mass destruction, ethnic conflicts and civil wars, interstate rivalries)
- **Reforming and Improving Governance at All Levels** (including existing international and regional institutions no longer equipped to cope with demands, problem of failing and failed states, the challenge of democracy and effective governance and understanding new forms of governance)
- **Advancing Human Well-being** (including economic development, global health, education and educational reform and equity [access to and distribution of resources, justice and human rights])

In addition, the faculty steering committee for the international initiative, which is co-chaired by Professors Chip Blacker (Stanford Institute for International Studies) and
Elizabeth Pate-Cornell (Engineering), is also focusing on three crosscutting drivers that impact on the primary problems noted above and that include

- *Globalization*
- *Technological Change*
- *Cultural Diversity*

The committee on the international initiative will continue to address the intersection of these issues, including their relationship to the initiatives on the environment and BioX. If you have an interest in this initiative you should feel free to contact our School of Medicine representative, Dr. Lucy Tompkins, Professor of Medicine (Infectious Diseases) at [LucyTomp@stanford.edu](mailto:LucyTomp@stanford.edu) or Drs. Blacker or Pate Cornell.

The other emerging initiative at an even earlier state of development is the “Arts Initiative” that is being lead by Professor Bryan Wolf. There are many reasons to include the arts as a broad university initiative, including the fact that the arts are about values, critical thinking, imagination, empowerment and globalization. The goal of the Stanford Arts Initiative is to engage the entire University – from science, medicine and engineering to business and law – “in an innovative, boundary – crossing effort to re-imagine the role of the arts at Stanford in the twenty-first century”. Among the tangible goals is the establishment of the Stanford Arts Center, whose goal will be to coordinate the many different arts programs already present at Stanford, to initiate new programs, to enhance the presence of the arts within the undergraduate residential life and to establish an active program of Arts Fellows and Artists-in-Residence. It is important to note that the School of Medicine also has a longstanding interest in Medical Humanities and the Arts that has engaged students and faculty. Indeed, it is also worth noting that one of our new Scholarly Concentrations focuses on medical humanities. Thus, as this initiative evolves, it is clear that it will have important interconnections to medicine. The Committee will be doing outreach during this summer and I would certainly recommend that those who are interested to contact Professor Wolf ([bwolf@stanford.edu](mailto:bwolf@stanford.edu)).

In addition to these exciting initiatives, one other cross-school initiative that will take life over the next year will be the recreation of graduate education. The opportunity at Stanford is to develop new interdisciplinary and joint degree graduate education programs. To evaluate this, a Commission on Graduate Education is being established by the President and Provost that will, over the next year, critically assess ways that Stanford can pave new paths in graduate education. This too should be an exciting and important initiative.

Taken together these crosscutting initiatives on BioX, the environment, international issues, the arts and graduate education offer the template for further transforming Stanford. There are challenges we are uniquely poised to address – and that will provide an exciting time for Stanford in the 21st Century.

**Dr. Irv Weissman Testifies Before a Senate Committee on Stem Cell Research**
On July 14th the Senate Commerce Committee’s Subcommittee on Science, Technology and Space held another session in a series of hearings addressing the stem cell research policy. Past hearings have served as a vehicle for Chairman Sam Brownback (R-KS) to promote opposition to embryonic stem cell research. This hearing, however, provided a tangible example of how the politics surrounding stem cell policy have changed in recent months.

Ryan Adesnik, Director of Federal Relations, attended the hearings and reports that Senator Brownback sought to limit the hearing’s focus to success stories developed through adult stem cell research, hoping to make the case that such successes obviate the need to pursue embryonic stem cell research, a line of research that is far more controversial. However, the coordinated outreach efforts of academic institutions and disease advocacy groups provided a new political backdrop. That effort, which included public support from Nancy Reagan and letters signed by over 200 House Members and 58 Senators in public opposition to the President’s stem cell research funding policy made it extremely difficult for Senator Brownback to limit debate. Of particular note, a clear majority of Senator Brownback’s subcommittee were signatories to the Senate letter. This group included such conservative Senators as Trent Lott (R-MS), Ted Stevens (R-AK) and K. Bailey Hutchison (R-TX).

The change in political dynamic was clearly shown in the fact that no Republican members attended to the hearing to support Chairman Brownback’s point of view. Subcommittee members had invited Dr. Irving Weissman, the Karel and Avice Beekhuis Professor of Cancer Biology and the Director of the Institute on Cancer and Stem Cell Research, to provide the counterpoint. Members of the Subcommittee in attendance spent their time vigorously questioning witnesses espousing Chairman Brownback’s view, and they relied on Dr. Weissman to explain the science.

Dr. Weissman testified about the value and potential of adult stem cell research but eloquently defended embryonic stem cell research against misguided efforts to ban certain forms of embryonic research. He called for changes to federal restrictions that severely limit public funding support. In imploring the Subcommittee Dr. Weissman stated, “I urge you to think hard about whether you wish to overrule good science and medicine and ban some kinds of biomedical research and therapies for the first time in American history…In my own personal moral view, those in a position of advice or authority who participate in the banning or enforced delays of biomedical research that could lead to the saving of lives and the amelioration of suffering are directly and morally responsible for the lives made worse or lost due to the ban.” In conclusion Dr. Weissman testified, “If you have real concerns about our economy, or our ability to recruit and train the best and brightest for biomedicine, or our ability to develop and prescribe the best therapies for our patients, I believe you will choose the American way of sensible actions, and when appropriate, regulation, not abolition.”

Subcommittee member Senator Ron Wyden (R-OR) hit directly on the conclusion of his fellow panelists in attendance when he stated, “While research shows that using
adult stem cells can help some people, there are millions of Americans who suffer from a host of devastating diseases… who I believe deserve more.”

**Opportunities for a Clinical Research Scholarly Concentration**

This Fall a new Scholarly Concentration in Clinical Research will be introduced into the Medical School Curriculum. Dr. Charles Prober, Professor of Pediatrics, Medicine and Microbiology & Immunology will serve as the course director. The overall mission of this new Scholarly Concentration will be to develop skills critical to the translation of scientific discoveries and knowledge into optimal patient care. Dr. Prober, who is also the Scientific Director for the Glaser Pediatric Research Network, has a passion for using acronyms to describe new programs – as he did when he helped develop the ACCESS and PRECEPT programs among others. Accordingly, he has described the new concentration under the banner of TRIUMPH (calling up images of a sleek motorcycle – to an older generation of course – or a cool sports car) but now standing for “Translational Research to Improve Understanding of Medicine and Patient Health” (aka TRIUMPH).

Dr. Prober and his colleagues note that students benefit from being knowledgeable about the principles that underpin clinical research since they also provide the skills to more critically evaluate purported advances in clinical care and provide a foundation for lifetime learning in clinical medicine. Moreover, clinical research is a dividend of the School’s mission in Translating Discoveries ([http://medstrategicplan.stanford.edu/](http://medstrategicplan.stanford.edu/)) and clinical investigators are, in a number of ways, the translators that bring discovery from the laboratory to the patient.

The TRIUMPH curriculum will be comprised of both didactic course work and research experience. Among the courses will be “Epidemiology and Clinical Research Seminar” and “Introduction to Probability and Statistics for Epidemiology” among others. In addition, students will learn how to critically read and interpret the medical science literature and become conversant with evidence-based medicine. As with other Scholarly Concentrations, students will be able to pursue either a “Scholarly Track” or an “Original Research Track.” The preferred option is the original research track, which will engage the student in an in-depth hypothesis driven project involving data collection, analysis and reporting and which may also permit the student to gain a Masters Degree. As with other scholarly concentrations, it is expected that the student will be engaged with this work over a number of years.

This new scholarly concentration will join the current eight existing ones. Together they provide a reasonably broad set of offerings and opportunities for our students. They represent a great start although it is expected that there will be evolution of the scholarly concentrations based on their interest, opportunity and overall success.
Dr. Ron Levy on Discovery Channel

As you know, Dr. Ron Levy was recently honored for his pioneering work in developing immunological approaches to the treatment of cancer, focusing on non-Hodgkin’s lymphoma. His work has been widely celebrated and was recently featured on the Discovery Channel. If you missed that show and want to see the short video, click the following site:
http://171.65.5.8/medhonors/DHC%20Medical%20Honors%20-%20Ron%20Levy.mpg

Stanford Medical Students Selected for HHMI Training Fellowships

I am pleased to announce that six Stanford Medical Students have competed successfully for Howard Hughes Medical Institute Research Training Fellowships. The successful students and their research advisors include:

- Kevin Forsythe with Susan Knox (Radiation Oncology)
- Oscar Gonzalez with Philip Tsao (Medicine/Cardiovascular)
- Holbrook Kohrt with Peter Lee (Medicine/Hematology)
- Mary-Elizabeth Muchmore with Judith Shizuru (Medicine/Bone Marrow Transplant)
- Matthew Siedhoff with Michael Longaker (Plastic Surgery)
- Leroy Sims with Griffith Harsh (Neurosurgery)

In Memoriam: Stephanie Anne Franchak

Dr. Stephanie Ann Franchak joined the incoming class of pediatric interns at the Lucile Packard Children’s Hospital this June with the goal of becoming a provider of health care to children. As she began her internship it could not be imagined that she would soon become a patient and that her own illness, which sadly ended in her death on July 14th, would leave an indelible mark on her colleagues and health care providers across the Stanford Medical Center in such a different way that she had anticipated. Sadly the promise of her own important personal contributions to improving the lives of others succumbed to a ravaging cancer that did not respond to the extraordinary efforts by physicians and other health care providers who tried so hard to help save her life. Many of these individuals came together for a Memorial Service on July 20th to reflect on Stephanie’s life and the unique and special gifts that she brought to all she came to know. The tragedy of her untimely death was deeply felt by all – but her impact on the lives of the communities she embraced will surely live on.

Awards and Honors

Two world-renowned Stanford Faculty members are recipients of the 2004 Novartis Immunology Prizes that were awarded at the XIIth International Congress of Immunology on July 19th.
• **Dr. Hugh McDevitt**, Professor of Microbiology and Immunology and of Medicine, received the Clinical Immunology Prize for his discovery, mapping and characterization of major histocompatability complex-linked control of the immune response.

• **Dr. Leonard Herzenberg**, Professor of Genetics, received a Special Immunology Prize for his development of the first Fluorescence-Activated Cell Sorter (FACS) and introduction of fluorescent labeled antibodies as reliable FACS reagents.

Congratulations to Drs. McDevitt and Herzenberg

**Appointments and Promotions**

- **Clarence Braddock** has been appointed to Associate Professor of Medicine at the Stanford University Medical Center, effective 7/1/2004 to 6/30/2009.
- **Eliza Chakravarty** has been appointed to Assistant Professor of Medicine (Immunology and Rheumatology) at the Stanford University Medical Center, effective 7/1/2004 to 6/30/2007.
- **Steven Chang** has been reappointed to Assistant Professor of Neurosurgery at the Stanford University Medical Center, effective 7/1/2004 to 6/30/2008.
- **Karl Deisseroth** has been appointed to Assistant Professor of Bioengineering and of Psychiatry and Behavioral Sciences, effective 1/1/2005 to 12/31/2008.
- **George Fisher** has been promoted to Associate Professor of Medicine (Oncology) at the Stanford University Medical Center, effective 7/1/2004 to 6/30/2009.
- **Pehr Harbury** has been promoted to Associate Professor of Biochemistry, effective 7/1/2004.
- **John Higgins** has been reappointed to Assistant Professor of Pathology at the Stanford University Medical Center, effective 7/1/2004 to 6/30/2008.
- **Sharon Hunt** has been reappointed to Professor of Medicine (Cardiovascular Medicine) at the Stanford University Medical Center, effective 7/1/2004.
- **Amreen Husain** has been reappointed to Assistant Professor of Obstetrics and Gynecology at the Stanford University Medical Center, effective 6/1/2005 to 5/31/2008.
- **Laura Johnston** has been reappointed to Assistant Professor of Medicine at the Stanford University Medical Center, effective 7/1/2004 to 6/30/2008.
- **Terence Ketter** has been promoted to Professor of Psychiatry and Behavioral Sciences, effective 7/1/2004.
- **Jonathan Katz** has been promoted to Associate Professor of Neurology and Neurological Sciences at the Palo Alto Veterans Affairs Health Care System, effective 7/1/2004 to 6/30/2009.
- **Jose Montoya** has been promoted to Associate Professor of Medicine (Infectious Diseases) at the Stanford University Medical Center, effective 7/1/2004 to 6/30/2009.
- **Matilde Nino-Murcia** has been promoted to Professor of Radiology at the Palo Alto Veterans Affairs Health Care System, effective 7/1/2004.
- **Robert Negrin** has been promoted to Professor of Medicine (Bone Marrow Transplantation), effective 7/1/2004.
- **Dmitri Petrov** has been reappointed to Assistant Professor of Biological Sciences, effective 7/1/2004 to 6/30/2007.
- **Stephen Quake** has been appointed to Professor of Bioengineering, effective 8/1/2004.
- **Clare Twist** has been reappointed to Assistant Professor of Pediatrics (Pediatric Hematology/Oncology) at the Lucile Salter Packard Children's Hospital, effective 6/1/2005 to 5/31/2007.